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IA ETHICS AND CAMPAIGN DISCLUSURE BE

Reset Form

lowa Ethics and Campaign Disclosure Board

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

8

0.00

510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073	FOR INSTRUCT DISCLOSUR	IONS, SEE BACK OF FORM E SUMMARY PAGE		ZUU8 MAY I	5 AM 8:4
COMMITTEE NAME (Must be	same as on Statement of O	rganization)			
Kapician-	for State	Senate	1 1	FORM	
IMPORTANT: Indicate by # type (1) Statewide/Legislative/Judge S (4) County Central Committee (5)	of committee you are reporting for tanding for Retention Candidate County Candidate / 6 Vity Ca	(2)State PAC (3)State Party	(R	DR-2 ev. 07/2007)	DISCLOSURE REPORT
Subdivision Candidate (8)Count 11) Local Ballot Issue	PAC (9) City PAC (10) Scho	ol Board or Other Political Subdivision PAC	(150	r Office Use Only	11011
CANDIDATE COMMITTEES	ONLY:			mm. #	100
Candidate Name	JACT;	Political Party (if applicable)		gged In <u>G</u> W	
Tim Kap	ucian	Republican			
Office Sought Senate		District (if Senate or House)		mputer dited	
	aced tous	Pursuant to Iowa Code sections 688.32A ろ <u>PR-443-3318</u> TELEPHONE		5-15- DATE SIG	<u>0</u>
AM FILING A 5-1	4	REPORT FOR (1) ELECTION	//O\11011 E		
· · · · · · · · · · · · · · · · · · ·	port date)			LECTION YEAR	₹.
CHECK IF AMENDMENT TO	•	Indicate by #	• 🕛		
	TREPORT DATED		Local Comm	ittees, enter Date	of Election
Check if this is final (termina (You must continue to	ion) report and attach Notice file reports until a DR-3 is file	M)	County & Lo which Election	cal Committees, e on is held	nter County in
STATEME	NT OF CASH ON HAN	D			
CASH ON HAND at the beginni committee. This amou of the last reporting pe	nt MUST be the same as the	otal of all funds held by the cash on hand at the end first report filed.)	\$	12,916	. la la
	TAKEN IN THIS PERIOD		Ψ		
		dule A) (*also see in-kind below)		5,015	60
Schedule F: Loans Re	ceived total (Attach Schedule	9 F)	*********	2,013	.00
		ach Schedule H)			©
(Schedule H	applies to Candidates' Com	mittees Only)	*******		<u> </u>
· · · · · · · · · · · · · · · · · · ·		SUB-TOTAL	S	17,931	.66
SUBTRACT TOTAL M	ONEY SPENT THIS PERIO		•		
Schedule B: Expenditu	res total (Attach Schedule B) (**also see debts and loans below)		8,534	1.34
Schedule F: Loan Rep	ayments total (Attach Sched	ule F)			, 00
		port balance must be zero)			732
), 60
N KIND CONTRIBUTIONS (Fr	om Schedule E - Attach Sche	dule E)			0,00
OUTSTANDING LOANS (From	Schedule F - Attach Sched	ıle F)	··········· •		000
ONSULTANT BREAKDOWN (Schedule G Attached?)	,, ,	······ Φ	YES X NO	

For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	Specialist and section of the	A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)	\neg	_	CK THIS BOX IF NDING FORM
Kapucian for State Senate]	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	NUMBER				INCOME
1.1.5	ID#	Mrs, Pennis Maled 2002 DHRAVE Belle Plaine, TA 52008		\$	
1/11/08	CK#	Belle Plaine It 5000		25,00	LJ
	ID#	Mike wanters			
111/08	CK#	Belle Plaine TA 52008		25.00	<u> </u>
	ID#	Jamie Kaloupek			
411/08	CK#	608 1st St Elberon IA 52225 (co.	u)	50.00	
	≀D#	Pani Pickerin			
1/11/08	CK#	6946 ISTEL AVEN Keystone, IA 52349		50.00	
	ID#	Randy Hilleman			
111/08	CK#	1315 1504 St St Anthony JA 50239		50.00	
	ID#				
1/11/08	CK#	Craig Olsoh 7218 27th Ave Newhall IA 52315		160,00	
	ID#	Bill Schen			
411/08	CK#	1345 71st St Keystone, IA 52249		100,00	
	ID#	Tami, Fisher			
1/11/08	CK#	406 Traut St Blairstown AA 50009		100.00	
	ID#	Samuele Parizek			
1/11/08	ск#	3152 285th St Elberon IA 52225		Z50.00	
	ID#				
1/11/08	CK#	Steve Vargason 7007 lbte Ave Keystone, IA 50049		350.00	
			SUB-TOTAL		
				\$1,000.00	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____of ____

TOTAL (if last page of this schedule)

For Instructions, See Back of Form Reset Form				
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS		
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF I		
Kapucien for State Senate	.			

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
RECEIVED	(if applicable)	THE ARE ABOUTOUT STATEMENT OF	TO CANDIDATE*	RECEIVED	FUND-
(MM/DD/YR)	AND PAC CHECK		(if applicable)		RAISER
	NUMBER				INCOME
, .	10#	Doniel Kalina		s	
111/08	CK#	3092 1A Hunt 21		I * I	
		Elberon IA SJEES		250.00	
	ID#	Keith Sash			
عماعال	CK#	301 W 1st 54			
11508		Glad brook IA 50635		750.ea	
	ID#	Shery Jesina			
ا ارحاء	CK#	12737 O Ave			
1/15/08) CIN#	Toledo JA 52342	,	250,00	L
· 	ID#				
ما ا ا	01411	Dean Franzenburg 17218 15th Ave		· i	1
2 7 08	CK#	Keystone IA 50049		100.00	<u> </u>
	ID#			, 50,00	
1	_	wayne Newton 109 Fremont St NZ			
2 22 08	CK#	1 1		35,00	
<u> </u>	ID#	Blairstown, IA 52209		33,00	
, ,	10#	136 Tomahawk Tri SE			
22208	CK#	136 Tomahawe 171 DE			<u> </u>
	104	Ceder Rapide TA 52403		35,60	
_	ID#	Doyle Reinberg		1	
2/22/08	CK#	1289 70th St		75.00	
-(- -0		Keystone, TA 52249		22,00	
	ID#				
Z 22 08	CK#	Cliftond Carney 3277 Dogwood Ave			
_(-(-		Adair TA 50002		30.00	
	ID#				
مامماح	CK#	Larry Meyer 410 and Ave			
2/22/08		Keystone, TA 52249		50.00	
	ID#				
-11-6	CK#	Greg Franzenburg 6915 15th Ave			
2/22/08	00#	Keystone, IA 50249		100.00	L
			SUB-TOTAL	0 200	
			JUD-IVIAL	\$1,105,00	
		TOTAL (if last page of	of this schedule)		
			-	e e	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A)

For Instruction	ons, See Back of F	orm	et Form	CHEDULE		
	IONS MONEY TA		(F	A Rev. 07/03)	MONETA	
COMMITTEE	NAME (Must be same	as on Statement of Organization)			ECK THIS B ENDING FO	
STATE CANDIDA NUMBER AND THE DISCLOSURE BOX	E LYC CHECK HOMPEK IN	IBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILA	COMMITTEE), LIST BLE FROM THE IC	THE PAC ID	DENTIFICATION AND CAMPA	ON IGN
KESPONSIBILIT	IES AND SHOULD IMMI	I INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO EDIATELY CONTACT THE BOARD.				
CAUTION: Sec commercial purp	tion 68B.32A(6), prohib pose by any person oth	its the use of information copied from reports and statement of the statutory political committees.	ents for soliciting) contributio	ons or for a	ny
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONS TO CANDIDA (if applicable	TE* R	MOUNT ECEIVED	√ IF FO FUND- RAISEF INCOM
2/22/08	ID# CK#	Doug Silhanek 2952 73+2 9+ Atking IA 52206		\$	>o,∞	
2/22/08	ID#	Jerome Junge 403 first Ave				
£ 1	ID# CK#	Keystone IA 52249 Loras Schulte 305 Apache Dr			0.00	
7/22/08	ID#	Morway IA 50318 Wayne Ridscher 7079 litter Ave		10	0.00	
222 08	ID#	Day McKechnie		10	0.00	
2/22/08	ID#	4526 Ist Aue NW Unit D Cedar Rapide IA 52405 Dale Bartert	-	10	0.00	<u> </u>
3/25/08	CK#	mediapolis, IA 53637		6	9.00	
3 10 08	CK#	John Meyer 16616 15th Avenue Keystone TA 50349		5	0.00	
80016	CK#	Gbria Fewerbach 108 3rd Avenue Keystone IA 52249		7	5.00	
310/08	ID# CK#	Jim Buch 1339 14th Avenue Belle Plaine #4 52008			0.00	
3/10/08	ID# ~	Donald Krug 7301 33rd Avenue Atkins, IA52206).es	
			SUB-TOTAL	\$7	BS,00	
		TOTAL (if last page	or uns schedi	\$	Ī	

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TATE CANDIDATES IN IUMBER AND THE PAC CHISCLOSURE BOARD. ROTE: ANY PERSON, CRESPONSIBILITIES AND CRESPONSIBIL	CID NUMBER (if applicable) NOTE: OF AC CONTRICT OF AC ID NUMBER (if applicable) NOTE: OF AC ONTER (if applicable) NOTE: OF AC ONTER (if applicable) NOTE: OF AC ONTER (if applicable) NOTHER THAN AN ID SHOULD IMME AC ID NUMBER (if applicable) NUMBER		O YOUR CAMPAIGN THE IOW, THE I	CHECK THAMENDING THE PAC IDENTIFIE A ETHICS AND CAN MAY HAVE FILE CONTRIBUTIONS OF THE PACE IN THE P	G FORM CATION AMPAIGN LING for any TFU RAI INC
TATE CANDIDATES IN LUMBER AND THE PAC CONSISCIOSURE BOARD. IOTE: ANY PERSON, CIESPONSIBILITIES AND ESPONSIBILITIES AND ESPONS	NOTE: IF A CONTRICHECK NUMBER IN OTHER THAN AN ND SHOULD IMME BB.32A(6), prohibity any person other AC ID NUMBER (if applicable) ID PAC CHECK NUMBER	IBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO EDIATELY CONTACT THE BOARD. Sits the use of information copied from reports and statement than statutory political committees. NAME AND ADDRESS OF CONTRIBUTOR Harald Ritscher 1521 Tist St Keystone TA S2249 Pamela Taylor 3341 Windhawen LY Codar Rapids TA 52411 Associated General Contractor of Towa Pac	ABLE FROM THE IOW. O YOUR CAMPAIGN ments for soliciting c RELATIONSHI TO CANDIDATI (If applicable)	AMENDING THE PAC IDENTIFIE A ETHICS AND CA N MAY HAVE FILE CONTributions or P AMOUN RECEIVE \$ 100.6	G FORM CATION AMPAIGN LING for any TFU RAI INC
TATE CANDIDATES IN IUMBER AND THE PAC CONSISCIOSURE BOARD. IOTE: ANY PERSON, CRESPONSIBILITIES AND EXEMPTION: Section 68 ommercial purpose by DATE RECEIVED (MM/DD/YR) AND ID# CK# ID# CK# ID# CK# ID# CK# ID# CK#	OTHER THAN AN NO SHOULD (MME BB.32A(6), prohibity any person other AC ID NUMBER (if applicable) ID PAC CHECK NUMBER	IBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO EDIATELY CONTACT THE BOARD. It is the use of information copied from reports and statement than statutory political committees. NAME AND ADDRESS OF CONTRIBUTOR Harald Ritscher 1521 Tist St Keystone, TA 52249 Pamela Taylor 3341 Wind haven LY Codar Rapids TA 52411 Associated General Contractor of Towa Pac	ABLE FROM THE IOW. O YOUR CAMPAIGN ments for soliciting c RELATIONSHI TO CANDIDATI (If applicable)	A ETHICS AND CA	AMPAIGN LING for any IT V F FU RAI INC
AUTION: Section 68 ommercial purpose by DATE RECEIVED (MM/DD/YR) AND ID# CK# ID# CK# ID# CK# ID# CK#	ND SHOULD (MME BB.32A(6), prohibity any person other AC ID NUMBER (if applicable) ND PAC CHECK NUMBER	EDIATELY CONTACT THE BOARD. its the use of information copied from reports and statemer than statutory political committees. NAME AND ADDRESS OF CONTRIBUTOR Harold Ritscher 1521 Tist St Keystene TA 52249 Pamela Taylor 3341 Wind haven LY Codar Hapids TA 52411 Associated General Contractor of Towa Pac Tol E Court Avenue	RELATIONSHI TO CANDIDATI (If applicable)	P AMOUN RECEIVE	for any
DATE PARECEIVED (MM/DD/YR) ANI 3 3 08 CK# 1D# CK# 1D# CK# 1D# CK# 1D# CK# 1D# CK# 1D# CK#	AC ID NUMBER (if applicable) ID PAC CHECK NUMBER # 6 00 4	NAME AND ADDRESS OF CONTRIBUTOR Harold Ritscher 1521 That St Keystone, IA 52249 Pamela Taylor 3341 Windhawan LN Codar Rapids IA 52411 Associated General Contractor of Iowa Pac	RELATIONSHI TO CANDIDATI (If applicable)	\$ 100,6	T V IF ED FUI RAI INC
RECEIVED (MM/DD/YR) AND ID# CK# ID# CK# ID# CK#	(if applicable) ID PAC CHECK NUMBER # 6004 # 144	Harold Ritscher 1521 That It Keystone, ITA 52249 Pamela, Taylor 3341 Windhawon Ln Codar Papids, ITA 52411 Associated General Contractor of Iowa Pac Tol E Court Avenue	TO CANDIDATI (If applicable)	\$ 100,6	ED FUI RAI INC
3 3 08 CK# 1D# CK# 1D# CK# 1D# CK# 1D# CK#	# 6~4 #444	Keystone IA Saatg Reystone IA Saatg Pamela Taylor 3341 Windhawon Ln Codar Papids IA 5a411 Associated General Contractor of Iowa Pac Toll E Court Avenue	s	25,0	xo _
	# 6004 #4144	3341 Windhaven Ln Codar Papids JA 52411 Associated General Contractor of Iowa Pac 701 E Court Avenue	s		
CK# CK# CK# CK# CK# CK# CK#	*4694	Associated General Contractor of Iowa PAC 701 E Court Avenue	s		
CK# ID# CK#		Des Moines IA 50309			-U-U
CK#		•			
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			SUB-TOTAL	1e) 52,195	ioc

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE	BACK OF FORM
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Reset Form	SCHEDULE				
COUNT	B (Rev. 07/03)	MONETARY EXPENDITURES			
ISLATIVE MN AND THE OM THE IOWA	CHECK THIS BOX IF				

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT
STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE

CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization) Senate CANDIDATE NAME AND ADDRESS TO WHOM **PURPOSE AMOUNT** DATE ID NUMBER **EXPENDITURE** (DESCRIBE TRANSACTION) EXPENDED **EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# 2,000 doubled Sided Pamph be 13 River Ink CK#2001 4-29-08 \$327.54 ID# brochunes 10,000 CK#2007_ 4-29.08 3,1**3**0.00 ID# 2,500 12x24 51ghr 5,600 yard 51ghs Store Com CK#2003 4-29-08 5200 5 6,086,80 ID# CK# ID# CK# ID# CK# ID# CK# ID# CK# SUB-TOTAL \$ TOTAL (if last page of this schedule) \$8,534.34

THIS BOX APP	LIES TO	CANDIDATES'	COMMITTEES	ONLY
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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		of	